



DEVELOPMENT OF IMMUNIZATION REGISTRIES

WHAT IS THE PUBLIC HEALTH ISSUE?

In 2002, 25% of the nation's 2-year-olds were not fully up-to-date on immunizations, placing them and others at risk of vaccine-preventable diseases. Public health officials cannot easily predict which communities are at risk for outbreaks of vaccine-preventable diseases. Because about 23% of U.S. children change healthcare providers by age 2 and/or receive immunizations from more than one provider; incomplete records are scattered among different doctors, resulting in both redundant and insufficient vaccination. The public's concerns about potential adverse health effects associated with vaccination have increased in recent years. Immunization information systems are needed that can easily and accurately track immunization coverage and data related to vaccine safety.

WHAT HAS CDC ACCOMPLISHED?

- CDC worked with the American Immunization Registry Association and the Association of Immunization Managers to form the Programmatic Registry Operations Workgroup (PROW) to develop the PROW *Standards of Excellence*. The National Vaccine Advisory Committee in 2003, endorsed this document which supports vaccine management, provider quality assurance, service delivery, consumer information, vaccine-preventable disease surveillance, and vaccination coverage assessment.
- 12 minimum registry functional standards and Standards for Certification were established. Certification is a voluntary process that will be performed at the request of the registry. In 2002, three statewide registries self-reported that they met all of the standards.
- Immunization registries demonstrated the value of immunization registry data by providing reliable information on the impact of the DTaP and pneumococcal conjugate vaccine shortage on vaccination coverage levels.
- A cost study to characterize the costs of immunization registries in the United States was conducted at 24 sites and the results of this study will be published in Spring 2004. In addition, CDC staff is working with the Utah Department of Health to collect data that measure the administrative impact of its immunization registry on the Vaccine for Children Program's related reporting activities.
- CDC, the Vaccine Adverse Event Reporting System, and Kaiser Permanente staff have demonstrated that vaccine adverse events can be reported in standard health level 7 (HL7) immunization electronic messages by providers and state/local health departments. Final message structure and processes will be completed and published in 2004.
- Updates to the HL7 Implementation Guide for Immunization Data Transactions and the de-duplication tool kit are now available online at www.cdc.gov/nip/registry/hl7guide.pdf and www.cdc.gov/nip/registry/dedup/dedup.htm.

WHAT ARE THE NEXT STEPS?

Healthy People 2010 objectives include increasing the proportion of children less than 6 years of age participating in fully operational immunization registries to 95%. To reach this goal, future immunization registry activities, supported by Section 317 Immunization Grant Program funds, will focus on

- Increasing the proportion of children and healthcare providers that participate in registries.
- Ensuring the privacy, confidentiality, and security of registry data.
- Promoting the use of accurate and efficient immunization registries and data.

For additional information on this or other CDC programs, visit www.cdc.gov/program

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